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REPORT TYPE: DRIVING RECORD	ORDER NUMBER: [REDACTED]
REPORT DATE: 9/16/2025	
DATA SUBMITTED:	
NAME:	STATE: [REDACTED]
LICENSE NUMBER: [REDACTED]	DOB: MM/DD/YYYY
REQUESTED BY: [REDACTED]	CLAIM NUMBER:
COMMENT:	
this is an official certification of the dmV record on file with this department.	
PERSONAL DATA REPORTED:	
NAME: [REDACTED]	
ADDRESS: [REDACTED]	
DATE OF BIRTH: [REDACTED]	CONDITION: SEE BELOW
LICENSE REPORTED:	
STATE: [REDACTED]	LICENSE NUMBER: [REDACTED]
ISSUE DATE: [REDACTED]	EXPIRATION DATE: [REDACTED]
STATUS: VALID	
CLASS: D	
RESTRICTIONS: NONE	
ENDORSEMENTS: NONE	
HISTORY REPORTED:	
***** PERSONAL DESCRIPTION *****	
[REDACTED]	
***** LICENSE(S) DATA *****	
LICENSE NUMBER: [REDACTED]	
(1) LICENSE TYPE:	NON COMMERCIAL
STATE CLASS CODE:	D
LICENSE CLASS:	ANY TYPE NON COMMERCIAL VEH FOR RECREATIONAL PURPOSES
STATUS:	VALID
ORIGINAL ISSUE DATE:	[REDACTED]
ISSUE DATE:	[REDACTED]
EXPIRATION DATE:	[REDACTED]
RESTRICTIONS:	NONE
ENDORSEMENTS:	NONE
STATE MESSAGE(S):	
EXPIRATION DATES IN THIS DOCUMENT MAY HAVE BEEN EXTENDED PURSUANT TO EXECUTIVE, OR LEGISLATIVE ACTION OF THE ISSUING JURISDICTION RELATED TO COVID-19., PLEASE CONSULT WITH THE JURISDICTION FOR FURTHER DETAILS.	
DRIVER TRAINING: 9	
***** DRIVING HISTORY *****	
NO ENTRIES FOUND FOR THIS PERSON.	
CLEAR DRIVING HISTORY AND RECORD.	
REPORT CONTINUED	

REPORT CONTINUED:

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OrderNumber:

OTHER INFORMATION:

(1)



DESCRIPTION: PERSONAL

SUB TYPE: HISTORICAL LICENSE

STATE CODE: EXPIRED

CLASS: CENT ISS TEMP DL, ID OR COMM LRNR PERMIT-ORIGINAL

END OF
REPORT